Attorney Docket No.: SONY-50R4813

2132/B



1 # ^ ·	المين.) IN T	HE UNITED STA	TES PATEN	T AND TRADEM	ARK OFFICE						
bearing of der	ng Fir	ertify that this st Class Po	s transmittal of the below des stage and addressed to the C	cribed document is bei commissioner for Pater	ng deposited with the United ts P.O. Box 1450, Alexandri	d States Postal Service in an envelope a, VA 22313-1450, on the below date						
Date Depo	of	01/20/0	6 Name of Person Making the Deposit:	KATHERINE RINA	LDI Signature of the Pers Making the Deposit:							
In re	Ap _l	olication o	of: Ryuichi Iwamura									
App	licat	ion No.:	09/972,371	Examir	ner: B. LANIER							
File	d:	10/05/0	01	Art Uni	t: 2132							
Confirmation No.: 4728												
For: METHOD AND SYSTEM FOR A SECURE DIGITAL DECODER WITH SECURE KEY DISTRIBUTION												
Commissioner for Patents P.O. Box 1450												
Alex	and	ria, VA	22313-1450	AMENDMEN	T TRANSMITTAL	$\mathcal{A}_{\mathcal{F}}$						
1.	. Transmitted herewith is an amendment for this application											
X	Transmitted herewith is a response to an office action for the above identified patent application. (12 sheets) Transmitted herewith are sheets of substitute formal drawings. Other: Applicant is other than a small entity											
				Extension	of Term							
3.		The proc	eedings herein are fo	r a patent applica	tion and the provisior	ns of 37 C.F.R. 1.136 apply.						
(a)				petitions for an extension of time under 37 C.F.R. 1.136 C.F.R. 1.17(a)-(d) for the total number of months checked below:)								
			Extension [] one month [X] two month [] three mont [] four months [] five months	hs s	Fee \$120.00 \$450.00 \$1,020.00 \$1,590.00 \$2,160.00 Fee \$ 450.00							
If an additional extension of time is required, please consider this a petition therefor.												
(b)		` <i>`</i>	Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.									
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Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)										
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total					
Total Claims	11	- 25 =	0	x \$50.00	\$0.00					
Independent Claims	2	- 4 =	0	x \$200.00	\$0.00					
Multiple Dependent Claim Fee (one or more, first added by this \$360.00 amendment)										
Total Fees										

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [x] A check in the amount of \$450.00
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer No: 45589

Respectfully submitted,

Date: 1/20/2006

Anthony C. Murabito Reg. No. 35,295